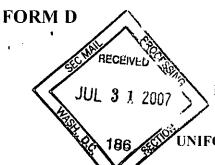
1408813



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

111
OMB APPROVAL
OMB Number: 3235-0076
Expires: April 30, 2008
Estimated average burden

hours per response 16.00							
SEC USE ONLY							
Prefix Serial							
DA	TE RECEIV	FD					
۵, ر	L						

Name of Offering (Deheck if this is an amendment and name has changed, and indicate change.)
Quinlan Private European Strategic Property Fund, LP- offering of Limited Partnership interests
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☐ Rule 506 ☐ Section 4(6) ☐ ULOE
Type of Filing: New Filing Amendment
A. BASIC IDENTIFICATION DATA
Enter the information requested about the issuer
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)
Quinlan Private European Strategic Property Fund, LP
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)
8 Raglan Road, Ballsbridge, Dublin 4, Ireland +353 1 631 5400
<u> </u>
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Telephone Number (Including Area Code)
Brief Description of Business
Investment in securities
Type of Business Organization
□ corporation □ limited partnership, already formed □ other (please specify):
business trust limited partnership, to be formed
Actual or Estimated Date of Incorporation or Organization: Month Year Actual or Estimated Date of Incorporation or Organization: O6 O7 Actual Estimated AUG O6 2007
Actual or Estimated Date of Incorporation or Organization: 06 07 🛭 Actual 🗆 Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:
CN for Canada: FN for other foreign jurisdiction)

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Avenue, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA										
 Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. 										
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner							
Full Name (Last name first, if individual) Quinlan Capital Management Limited. Business or Residence Address (Number and Street, City, State, Zip Code) 8 Raglan Road, Ballsbridge, Dublin 4, Ireland										
Check Box(es) that Apply: Promoter Beneficial Owner		Director	General and/or Managing Partner							
Full Name (Last name first, if individual) O'Donoghue, Ronan										
Business or Residence Address (Number and Street, City, State 8 Raglan Road, Ballsbridge, Dublin 4, Ireland	e, Zip Code)									
Check Box(es) that Apply: Promoter Beneficial Owner		Director	General and/or Managing Partner							
Full Name (Last name first, if individual) Vanderslice, Peter										
Business or Residence Address (Number and Street, City, Stat 54 East 64th St., New York, NY 10021	re, Zip Code)									
Check Box(es) that Apply:	☐ Executive Officer	Director	General and/or Managing Partner							
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State	e, Zip Code)									
Check Box(es) that Apply: Promoter Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner							
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										
Check Box(es) that Apply: Promoter Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner							
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

☐ Executive Officer

□ Director

☐ General and/or Managing Partner

Beneficial Owner

(Number and Street, City, State, Zip Code)

Check Box(es) that Apply:

Full Name (Last name first, if individual)

Business or Residence Address

□ Promoter

B. INFORMATION ABOUT OFFERING															
1!	Has the	issuer so	ld or does	the issue	r intend to	sell to no	n-accredit	ed investo	rs in this o	ffering?				Yes	No ⊠
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									•					
2.										\$ <u>11,0</u>	58,797*				
3.				ŕ	nin of a sin	ale unit?								Yes	No
											⊠				
	commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. N/A														
Full	Full Name (Last name first, if individual)														
					and Street,			e)							
Nam	e of Ass	ociated B	roker or D	ealer		-					•				
			al LLC												
					d or Intend I States)								🗖	All State	s
	AL	AK	AZ	AR	[SA]	CO	СТ	DE	DC	(FL)	[GA]	HI	ID	+	
		IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	МО]	
	MT	NE	MY	NH	NJ	NM	NY.	NC	ND	ОН	ОK	OR	PA		
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR	·	
Full	Name (L	ast name	first, if ind	ividual)		·			•					•	
Busir	ness or i	Residence	Address	(Number a	and Street,	City, State	e, Zip Cod	e)			-				
Nam	e of Ass	ociated B	oker or D	ealer							·				
					d or Intend							-			
	_													All State	5
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	CT	DE	[DC]	FL	[GA]	HI	ID		
		IN	IA I	KS	[K₹]	[LA]	ME	MD	MA	MI	MN	MS	MO	<u> </u>	
	MT RI	NE SC	NV SD	NH TN	TX	NM UT	NY VT	NC VA	[ND]	OH]	OK WI	OR WY	PA		
Full 1			first, if indi		الكنا	[01]		[VA]	[WA]	([VV]	[VV T]	[PK]		
	· · · · · · · · · · · · · · · · · · ·														
Busir	ness or f	Residence	Address	(Number a	and Street,	City, State	e, Zip Cod	e)							
Nam	Name of Associated Broker or Dealer														
					d or Intend								🗆	All State	-
	AL	[AK]	AZ	AR	CA	CO	CT	DE]	DC	FL	[GA]	ΉΙ			
		IN	IA	KS	KY	LA	ME	MD	MA	MI	[MN]	MS	MO		
	MT	NE	NV	NH	NJ	[NM]	NY	NC	ND	ОН	OK	OR	PA	· 	
	RI	SC	SD	TN	TX	UT	VT	VA	WA	[WV]	WI	WY	PR		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

^{*} In U.S. dollars, converted from Euros, as of July 13, 2007.

•	OFFEDING DDICE	NUMBER	OF INVESTORS	CYDENCES	AND USE OF PROCEEDS.
•	OFFIRING PRICE.	NUMBER	OF BYYES LORS.	. P. X P P. NNP.N	AND DSE OF PROUERDS

	already exchanged. Type of Security	Aggrega Offering F		Amount Aire Sold	ady
	Debt	\$N/A	·	\$ <u>N/A</u>	
	Equity	\$N/A	<u> </u>	\$ <u>N/A</u>	
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	\$N/A	·	\$ <u>N/A</u>	
	Partnership Interests	\$ <u>483,822</u>	364 *	\$ <u>281,540,7</u>	′15 *
	Other (Specify)	\$N/A		\$ <u>N/A</u>	
	Total	\$ <u>483,822</u>	364	\$ <u>281,540,7</u>	′15
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
		Numbe Investo		Aggregate Dollar Amo of Purchas	ount
	Accredited Investors	16		\$ <u>281,540,</u>	715
	Non-accredited Investors	0		\$ <u> </u>	
	Total (for filings under Rule 504 only)			\$	
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C —Question 1.	Type		Dellas Assa	
	Type of Offering	Type o Securi		Dollar Amo Sold	JUITE
	Rule 505	N/A		\$ <u>N/A</u>	
	Regulation A	N/A		\$ <u>N/A</u>	
	Rule 504	N/A	<u> </u>	\$ <u>N/A</u>	
	Total	N/A		\$ <u>N/A</u>	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees	• • • • • • • • • • • • • • • • • • • •		\$0	
	Printing and Engraving Costs	*********	⋈	\$ 90,000	
	Legal Fees		☒	\$ 750,000	
	Accounting Fees		\boxtimes	\$ <u>125,000</u>	
	Engineering Fees	**********		\$ <u> </u>	
	Sales Commissions (Placement Agent Fees)	*********	\boxtimes	\$ <u>2,360,000</u>	
	Other Expenses (identify) Miscellaneous (e.g. consulting fees, travel expenses.	***************************************	\boxtimes	\$ 590,000	

^{*} In U.S. dollars, converted from Euros, as of July 13, 2007.

	C. OFFERING PRICE	CE, NUMBER OF INVESTORS, EXPENSES AND U	SE OF PRO	OCEEDS		
` ar	nd total expenses furnished in response to	pate offering price given in response to Part C — Question Part C - Question 4.a. This difference is the "adjusted gros	SS		\$ <u>47</u>	9,907 <u>,364</u>
ea th	ach of the purposes shown. If the amount	pross proceeds to the issuer used or proposed to be used for any purpose is not known, furnish an estimate and checotal of the payments listed must equal the adjusted gross to Part C — Question 4 h above	k			
F			Of Dire	nents to ficers, ctors, & filiates	•	ments to
	Salaries and fees		🗆 \$	0	_ 🗆 \$	0
	Purchase of real estate		🗆 \$ _	0	_ 🗆 \$	0
	Purchase, rental or leasing and install and equipment	ation of machinery	🗆 \$	0	□ \$	0
	Construction or leasing of plant building	ngs and facilities	🗆 \$	0	_ 🗆 \$	0
	offering that may be used in exchange	ding the value of securities involved in this effor the assets or securities of another		0	\$	0
					_ U* _	
	• •					9,907,364
	Other (specify). INVESTMENTS		_ ⊔₃	<u> </u>	_ \Q\\$ <u>\47:</u>	9,907,304
			- 🗆 \$	0	_ 🗆 \$	0
	Column Totals		🗆 \$	0	<u> </u>	9,907,364
	Total Payments Listed (column totals	added)		⊠ \$ <u>4</u>	179,907,364	<u>-</u>
		D. FEDERAL SIGNATURE				
signatu	ire constitutes an undertaking by the is	signed by the undersigned duly authorized person. If the sum of the u.s. Securities and Exchange Con-accredited investor pursuant to paragraph (b)(2) of Rule	commission,			
	(Print or Type) Ilan Private European Legic Property Fund, LP	Signature &	Ju Dat	e ly <u>30</u> , 2	007	

Λ Ι	ľΤΕ	AI I	1 47 1	IN.
_		IV I		

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)